

# MAR 0 4 2013

STATE OF TENNESSEE
DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF AIR POLLUTION CONTROL

NOT TO BE USED FOR TITLE V APPLICATIONS



9th Floor, L & C Annex 401 Church Street Nashville, TN 37243-1531 Telephone: ( 615 ) 532-0554 FAX: ( 615 ) 532-0614

## PERMIT APPLICATION

						APC 20		
PLI	EASE TYPE OR F	RINT AND SUBMI	T IN DUPLICAT	E FOR EACH EMISS	ION SO	TRUE, A TACH APPROPRIATE SOURCE		
_DE	SCRIPTION FOR	MS. N'S LEGAL NAME				APC COMPANYPOINT NO.		
1.	ORGANIZATIO		dical Center		FOR	APC COMPANYPOINT NO.		
2.	MAILING ADDR	ESS (ST/RD/P.O. BOX			111	APC LOG/PERMIT NO.		
4.	MAILING ADDI	8045 Roane Med		ve	APC	9/1/00		
	CITY	0043 Roalie Wick	STATE	ZIP CODE	L	PHONE WITH AREA CODE		
	На	TN	37748	3	865-882-4346			
3.	PRINCIPAL TEC				PHONE WITH AREA CODE			
			n Veljkovich			865-882-4346		
4.	SITE ADDRESS (					COUNTY NAME		
		8045 Roane	Medical Center	Drive		Roane		
	CITY OR DISTAN	ICE TO NEAREST TO	WN	ZIP CODE		PHONE WITH AREA CODE		
2001	Secretary Control of the Control of	Harriman		37748	3	865-882-4346		
5.		RCE NO. (NUMBER W	VHICH UNIQUELY					
	IDENTIFIES THIS	041245168		YES ( )	NO(	Χ )		
6.	BRIEF DESCRIP	TION OF EMISSION	SOURCE					
	High Pressure	Steam Boiler						
	riigh i ressure	o oteam Boner						
7.	TYPE OF PERM		Т					
	CONSTRUCTION	Institute of the control of the cont	DATE 11 20	LAST PERMIT	NUMBE	041245168		
	( )	88-2011	DATE 11-30-	12 700677				
	OPERATING	DATE CONSTRU-	DATE COMPLE	TED LAST PERMIT	NUMBE			
	( X )	CTION STARTED 8-8-2011	11-30-12	7006	77			
	LOCATION	TRANSFER DATE		LAST PERMIT	NUMBE	R EMISSION SOURCE REFERENCE NUMBER		
	TRANSFER			18-10 W 10 NO 10 10 10 10 10 10 10 10 10 10 10 10 10				
	( ) ADDRESS OF LA	OTT LOCATION						
		ledical Center Driv	e, Harriman, Tr	n 37748				
8.					OPERAT	TION SINCE THE LAST CONSTRUCTION OR		
		RMIT APPLICATION						
	N/A							
9.	SIGNATURE (AP	PLICATION MUST BI	E SIGNED BEFORI	E IT WILL BE PROCESS	SED)	DATE		
10.	SIGNER'S NAME	E (TYPE OR PRINT)	TIT	TLE		PHONE WITH AREA CODE		
De	jan Veljkovich	)	Fa	cilities Director		865-882-4346/865-970-1279		
	J. 1900. 1900 J. 1900. 1901.					10-11		

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			T IN DUPLICATE	FOR EACH EMISS	SION SO	URCE. ATTACH APPROPRIATE SOU	RCE		
1.	SCRIPTION FOR ORGANIZATION	MS. N'S LEGAL NAME			111	APC COMPANYPOINT NO.			
			dical Center		FOR	73-0237	-01		
2.	MAILING ADDR	ESS (ST/RD/P.O. BOX	()		111	APC LOG/PERMIT NO.			
			lical Center Drive	3	APC	966970			
	CITY		STATE	ZIP CODE		PHONE WITH AREA CODE			
	На	arriman	TN	3774	3	865-882-4346			
3.	PRINCIPAL TEC				PHONE WITH AREA CODE				
		Deja	n Veljkovich		865-882-				
4.	SITE ADDRESS				COUNTY NAME				
		Micros 13 pro-00 conclusions	Medical Center I			Roane			
	CITY OR DISTAN	ICE TO NEAREST TO	WN	ZIP CODE		PHONE WITH AREA CODE			
		Harriman		37748		865-882-4346			
5.	EMISSION SOUL	HICH UNIQUELY	PERMIT RENEV	VAL NO (	v )		-		
	IDDITINIDO IIII	041245195		123 (	.,,,	X /	三	会	
6.	BRIEF DESCRIP	TION OF EMISSION	SOURCE				7	8	
	High Pressure	Steam Boiler			T				
						RO			
						$\sim$	5	2	
							70	5-	
						-	v.d	3	
7.	TYPE OF PERM	IT REQUESTED				——————————————————————————————————————	17	AIR POLLUTION CONTROL	
	TYPE OF PERMIT REQUESTED  CONSTRUCTION STARTING DATE   COMPLET			LAST PERMIT	NUMBE	R   EMISSION SOURCE REFERENCE NUM		, ,	
		88-2011	DATE 11-30-12	200 0 0		041245195			
	( )				MUMBE	- Carolina C	ADED		
	OPERATING	DATE CONSTRU- CTION STARTED	DATE COMPLET			R EMISSION SOURCE REFERENCE NUM	VIBER		
	( X )	8-8-2011	11-30-12	7006	/6	14			
	LOCATION	TRANSFER DATE		LAST PERMIT	NUMBE	ER EMISSION SOURCE REFERENCE NUMBER			
	TRANSFER ( )					s			
	ADDRESS OF LA	ST LOCATION		2740					
		ledical Center Driv	e, Harriman, Tn 3	37748					
8.	8045 Roane M	ledical Center Driv	EEN MADE TO TH		OPERA'	TION SINCE THE LAST CONSTRUCTION	N OR		
8.	8045 Roane M	ledical Center Driv	EEN MADE TO TH		OPERA'	TION SINCE THE LAST CONSTRUCTION	N OR		
8.	8045 Roane M DESCRIBE CHAI OPERATING PER	ledical Center Driv	EEN MADE TO TH		OPERA'	FION SINCE THE LAST CONSTRUCTION	N OR		
8.	8045 Roane M DESCRIBE CHAI OPERATING PEI N/A	ledical Center Driv NGES THAT HAVE B RMIT APPLICATION	EEN MADE TO TH	IS EQUIPMENT OR			N OR		
9.	8045 Roane M DESCRIBE CHAI OPERATING PEI N/A	ledical Center Driv	EEN MADE TO TH	IS EQUIPMENT OR		DATE	N OR		
9.	8045 Roane M DESCRIBE CHAI OPERATING PEI N/A	ledical Center Driv NGES THAT HAVE B RMIT APPLICATION	EEN MADE TO TH	IS EQUIPMENT OR		DATE	N OR		
9.	8045 Roane M DESCRIBE CHAI OPERATING PEI N/A	Tedical Center Driving Strat Have Bermit Application  PLICATION MUST BIE (TYPE OR PRINT)	EEN MADE TO THE.  E SIGNED BEFORE	IS EQUIPMENT OR			N OR		

#### CERTIFICATE OF BOILER INSPECTION Certif #: 700677 Re-Inspection Inspector Date (Initial) Date: 11/30/2012 DEPARTMENT OF LABOR & WFD DIVISION OF BOILER AND ELEVATOR INSPECTION Location Owner ROANE MEDICAL CENTER ROANE MEDICAL CENTER 2250 ROANE STATE HWY. 2250 ROANE STATE HWY. HARRIMAN, TN 37748 HARRIMAN, TN 37748 Boiler Number: T87851 Pressure Allowed: NB Number: Safety Valve Setting: 125 18065 Manufacturer: HURST Date Inspected: 10/24/2012 Year Built: 2012 Expiration Date: 10/24/2013 Insured by: STATE Inspected by: PETERS, DANNY Location in Plant: BLR RM THIS IS TO CERTIFY THAT THE HEREIN DESCRIBED BOILER OR PRESSURE VESSEL MAY BE OPERATED AT THE LOCATION AND UNDER THE CONDITIONS LISTED ABOVE. THIS BOILER OR PRESSURE VESSEL MAY NOT BE OPERATED LEGALLY UNLESS THIS CERTIFICATE IS POSTED UNDER GLASS IN A CONSPICUOUS PLACE NEAR THE BOILER OR VESSEL. COMMISSIONER CHIEF BOILER INSPECTOR ASST. ADMINISTRATOR

### **BOILER INSPECTION CERTIFICATE**

GARY COOKSTON

Charl W. Byon

CHAD W. BRYAN

STATE OF TENNESSEE

**Boilers Division** 

220 French Landing Drive 2nd Floor Nashville, TN 37243 Phone:615-741-2123 FAX:615-532-1469

ROANE MEDICAL CENTER 2250 ROANE STATE HWY. HARRIMAN, TN 37748

- Kul Davis

KARLA DAVIS

#### CERTIFICATE OF BOILER INSPECTION Certif #: 700676 Re-Inspection Inspector Date Date: 11/30/2012 (Initial) DEPARTMENT OF LABOR & WFD DIVISION OF BOILER AND ELEVATOR INSPECTION Location Owner ROANE MEDICAL CENTER ROANE MEDICAL CENTER 2250 ROANE STATE HWY. 2250 ROANE STATE HWY. HARRIMAN, TN 37748 HARRIMAN, TN 37748 Pressure Allowed: 125 Boiler Number: T87850 Safety Valve Setting: 125 **NB Number:** 18066 Manufacturer: HURST Date Inspected: 10/24/2012 Year Built: 2012 Expiration Date: 10/24/2013 Insured by: STATE Inspected by: PETERS, DANNY Location in Plant: BLR RM THIS IS TO CERTIFY THAT THE HEREIN DESCRIBED BOILER OR PRESSURE VESSEL MAY BE OPERATED AT THE LOCATION AND UNDER THE CONDITIONS LISTED ABOVE. THIS BOILER OR PRESSURE VESSEL MAY NOT BE OPERATED LEGALLY UNLESS THIS CERTIFICATE IS POSTED UNDER GLASS IN A CONSPICUOUS PLACE NEAR THE BOILER OR VESSEL. CHIEF BOILER INSPECTOR ASST. ADMINISTRATOR COMMISSIONER Wale Daves Yary W Cashatan Charl W. Byon

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CHAD W. BRYAN

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ROANE MEDICAL CENTER 2250 ROANE STATE HWY. HARRIMAN, TN 37748

KARLA DAVIS

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DEPARIMENT OF ENVIRONMENT AND CONSERVATION
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# PROCESS OR FUEL BURNING SOURCE DESCRIPTION

APC21(& 24)

- PY	LEASE TYPE OR PRINT, SUBM	יפוות או דו	ICATE AND	ATTACH TO TH	E PERMIT A	PPI ICA	TION					
					D 1 Dicion 7 7							
1.	OLGANIZATION NAME					1///	APC COMPANY-POINT NO.					
	ROANE MEDICAL					FOR						
2.	EMISSION SOURCE NO. (AS C	on permit	APPLICATIO	N)	SIC CODE	/// APC	APC PERMIT/LOG NO.					
3.	DISCRIPTION OF PROCESS OF	R FUEL BUR	NING UNIT	<u>1</u>								
	ROANE MEDICAL O	ENTER	2 WILL O	operate T	no High	4 PRE	issure steam Boilers					
	TO PRODUCE DON	IBSTIC I	APT WA	TER, HEA	TING WA	TER	STERIL PROCESSING					
AND HUMIDIFICATION FOR THE NEW HOSPITAL.												
4.	NORMAL OPERATION:	HOURS/DA			WEEKS/YE/	AR	DAYS/YEAR					
	<b>→</b>	24		7	52		365					
5,	PERCENT ANNUAL	DECFEB.	MARC	H-MAY	JUNE-AUG.		SEPTNOV.					
	THROUGHPUT: →	30		24	20		24					
6.	TYPE OF PERMIT APPLICATIO			47	22		(CHECK BELOW ONE ONLY)					
<u> </u>	PROCESS SOURCE: APPLY FOR		E PERMIT FO	OR EACH SOURCE,	( CHECK AT	,	(OLDOR DELOT ONE ONE)					
	RIGHT, AND COM	APLETE LIN	ES 7, 8, 13, AN	TD 14 ).	,		( )					
	PROCESS SOURCE WITH IN-P			TS OF COMBUSTIC ARATE PERMIT FO			( )					
				S 7, 8, AND 10 TH		(CD,	,					
	NON-PROCESS FUEL BURNIN											
	MATERIALS HEATED. COMPLETE THIS FORM FOR EACH BOILER OR FUEL (X) BURNER AND COMPLETE AN EMISSION POINT DESCRIPTION FORM (APC 22)											
				ND COMPLETE LI								
7.	TYPE OF OPERATION: CONTE	vuous,	ВА	NORMAL BA	ATCH	NORMAL BATCHES/DAY						
	(X	$\langle \rangle$	(	)	TIME							
8.	PROCESS MATERIAL INPUTS A	ND E	IAGRAM*	INPUT RATES	RATES (POUNDS/HO		/ (FOR APC USE ONLY)					
	IN-PROCESS SOLID FUELS	R	EFERENCE	DESIGN	ACTUA	Լ	/ SCC CODE					
	Α.						1					
*****	В.		_		······································		/					
							7					
	C.						//					
	D.						/					
							/					
E.						Ì	/ /					
	F.						/					
	6				···· <del>-</del>		/					
	G.						<i>i</i>					
			OTALS				/					
		11	ייערי		····		'					

<sup>\*</sup> A SIMPLE PROCESS FLOW DIAGRAM MUST BE ATTACHED.

9.			ATA: (COMPLETE L		USING A SEPA	RATE	ORM	FOR EA	CH BOILER )	
	BOILER NUMBER	STACK NUMBER**	TYPE OF FIRING**	•	RATED BO HORSEPO		CAP	ED INPO ACITY BTU/HR	(SPECIFY CA	ER RATING PACITY AND UNITS)
	B-1	5-1	AUTOMA:		500		2	11.0		
_	BOILER SI		DATE CONSTRUCT			LAST M	ODIFI	CATION	(EXPLAIN IN COM	MENTS BELOW).
01	11245		2012		<u>NA</u>					
	*** CYCLO REINJE IN CON	ONE, SPREADE ECTION ), OTHI MMENTS ).	MMON STACK WILL R ( WITH OR WITHO ER STOKER ( SPECIF	UT REINJECT Y TYPE ), HA	ION ), PULVER ND FIRED, AU	RIZED ( V FOMATI	WET C	OTHER	TYPE ( DESCRIBE	BELOW
10.			TE FOR A PROCESS S	OURCE WITH	IN-PROCESS	The state of the s				NG SOURCE)
	PRIMARY	FUEL TYPE (S	PECIFY)			STAN	DBY I	FUEL TY	PE(S)(SPECIFY)	
	FUELS USE	ED	ANNUAL USAGE	HOURI	Y USAGE	%	,	%	BTU VALUE	(FOR APC ONLY)
				DESIGN	AVERAGE	SULI	UR	ASH	OF FUEL	SCC CODE
	NATURAL	GAS:	10° CUFT 40. 637	21,500	CUFT 4600	///		11	1,000	
	#2 FUEL O	īL:	Nogligible	120	GAL			11	140,000 btu/gal	
	#5 FUEL OI	L:	10 <sup>3</sup> GAL	GAL	GAL					
	#6 FUEL OI	L:	10 <sup>3</sup> GAL	GAL	GAL			11		
	COAL:		TONS	LBS	LBS					
	WOOD:	(3)	TONS	LBS	LBS	111		11		
	LIQUID PRO	OPANE:	10 <sup>3</sup> GAL	GAL	GAL	111		11	85,000	
	OTHER (.SP TYPE & UN					-		,,		
1,		S USED AS A	FUEL, SPECIFY TYI	ES AND EST	IMATE PERC	ENT BY	WEI	GHT O	FBARK	
	NA									
2.	IF WOOD I	S USED WITH	OTHER FUELS, SPI	CIFY PERC	ENT BY WEIG	HT OF	woo	D CHAI	RGED TO THE BUR	RNER.
	NA									
3.	COMMENT	-								
	BOILE	rs ari	e in a par	LLEL.	ARRANG	EME	IN	T A	annua du	L fuel consump
	WILL	BE DI	VIDED BET	WEEN	THE T	wo.				
			re combi			020	-•			
									(4)	
	Oroni a mater									11
4.	SIGNATUR	E / /								DATE
1	Ejell	Alex	ced			22				11-20-2017

NUMBER NUMBER\*\*

B-2	5-2	AUTOMA	TK	500	>	21.0					
BOILER SE		DATE CONSTRUCTED		DATE OF	DATE OF LAST MODIFICATION (EXPLAIN IN COMMENTS BELOW).						
04124	5168	2012	•		NA						
** BOILER *** CYCLO REINJE IN COM	RS WITH A COM NE, SPREADER CTION ), OTHE IMENTS ).	MMON STACK WILL R ( WITH OR WITHOUT R STOKER ( SPECIF FOR A PROCESS S	UT REINJECT Y TYPE ), HA	AME STACK N TON ), PULVER ND FIRED, AU	RIZED ( V TOMATI	VET OR DRY C, OR OTHER	R TYPE ( DESCRIB	E BELOW	_		
	UEL TYPE ( SI		OUNCE WITH	n IN-FROCESS			YPE(S)(SPECIFY		_		
WWW G VION			·				10 000000 2000000				
FUELS USE	D	ANNUAL USAGE	DESIGN	Y USAGE AVERAGE	% SULF	1 100	OF FUEL	(FOR APC ONLY)			
NATURAL (	GAS;	106 CUFT	CUFT	CUFT	SULF		OF FUEL	SCC CODE	_		
		40.637	21,500	4600	111	1 1	1,000				
#2 FUEL OII	J	10 <sup>3</sup> GAL	GAL	GAL	-	1//	140.000		-		
		NEgligible	120			1	140,000 both/gal.				
#5 FUEL OIL		103 GAL	GAL	GAL		11	wing open.		_		
				17		1					
#6 FUEL OIL	.:	10 <sup>3</sup> GAL	GAL	GAL	-	11			-		
	İ					1					
COAL:	-	TONS	LBS	LBS		-   / /			_		
WOOD:		TONS	LBS	LBS	111				=		
LIQUID PRO	PANE;	10 <sup>3</sup> GAL	GAL	GAL	111	0.0	85,000		-		
OTHER (.SPE TYPE & UNI						111			_		
11. IF WOOD IS	USED AS A F	UEL, SPECIFY TYP	ES AND EST	IMATE PERC	ENT BY	WEIGHT OI	BARK		<b>-</b> 12		
12. IF WOOD IS	USED WITH	OTHER FUELS, SPE	CIFY PERCI	ENT BY WEIG	HT OF V	VOOD CHAR	GED TO THE BU	RNER.	<b>4</b> 0		
NA						¥.					
13. COMMENTS		3000 NA 10000									
BOLLER	S ARE	IN A PARAL	lel ai	rrange	MEN	T AND	ANNUAL	- FUEL CONSUMP	non		
WILL	BE DIV	DED BETT	WEEN -	NT 3HT	10.						
Bollobe	KD AK	E COMBIN	MILLON	CH1210	، سايار						
		₩ ®			*						
				**							
14. SIGNATURE	/				-			DATE	į		
America.	1/200	June O						11-20-2017			
Al service of	HETE	unce -	-	-				11-20-2012			

RATED BOILER

HORSEPOWER

RATED INPUT

CAPACITY

(106 BTU/HR)

OTHER BOILER RATING

(SPECIFY CAPACITY AND UNITS)

9. BOILER OR BURNER DATA: (COMPLETE LINES 9 TO 14 USING A SEPARATE FORM FOR EACH BOILER)

TYPE OF FIRING\*\*\*

